

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b>				<b>1. Requisition Number</b> SEE SCHEDULE		<b>Page</b> 1 <b>Of</b> 5	
<b>Offeror To Complete Block 12, 17, 23, 24, &amp; 30</b>							
<b>2. Contract No.</b> DAAE20-01-D-0024		<b>3. Award/Effective Date</b> 2001MAR12		<b>4. Order Number</b> 0002		<b>5. Solicitation Number</b>	
<b>6. Solicitation Issue Date</b>							
<b>7. For Solicitation Information Call:</b>		<b>A. Name</b> BOBBIE STEGALL		<b>B. Telephone Number (No Collect Calls)</b> (309)782-3618		<b>8. Offer Due Date/Local Time</b>	
<b>9. Issued By</b> TACOM-ROCK ISLAND AMSTA-LC-CSC-C ROCK ISLAND IL 61299-7630  <b>e-mail:</b> STEGALLB@RIA.ARMY.MIL		<b>Code</b> W52H09		<b>10. This Acquisition Is</b> <input type="checkbox"/> Unrestricted <input checked="" type="checkbox"/> Set Aside: % For <input checked="" type="checkbox"/> Small Business <input type="checkbox"/> Small Disadv Business <input type="checkbox"/> 8(A)  <b>SIC:</b> <b>Size Standard:</b>		<b>11. Delivery For FOB Destination Unless Block Is Marked</b>	
						<input checked="" type="checkbox"/> See Schedule	
						<b>12. Discount Terms</b> 1%-10 DAYS; NET 30	
						<b>13a. This Contract Is A Rated Order Under DPAS (18 CFR 700)</b>	
						<b>13b. Rating</b> DOA5	
<b>14. Method Of Solicitation</b>		<input type="checkbox"/> RFQ		<input type="checkbox"/> IFB		<input type="checkbox"/> RFP	
<b>15. Deliver To</b> SEE SCHEDULE		<b>Code</b>		<b>16. Administered By</b> DCMC ATLANTA 805 WALKER STREET SUITE 1 MARIETTA GA 30060-2789			
<b>Telephone No.</b>				<b>Code</b> S1103A			
<b>17. Contractor/Offeror</b> CUSTOM TECHNOLOGY OF AMERICA INC 409 GLOWWORM ROAD SWANSEA SC 29160-0000		<b>Code</b> 03YU1		<b>Facility</b>		<b>18a. Payment Will Be Made By</b> DFAS COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P O BOX 182264 COLUMBUS OH 43218-2264  Payment will be made by Electronic Funds Transfer	
<b>Telephone No.</b>		<b>Code</b> HQ0338					
<input type="checkbox"/> <b>17b. Check If Remittance Is Different And Put Such Address In Offer</b>		<b>18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked</b> <input type="checkbox"/> See Addendum					
<b>19. Item No.</b>		<b>20. Schedule Of Supplies/Services</b>			<b>21. Quantity</b>		<b>22. Unit</b>
		SEE SCHEDULE					
		(Attach Additional Sheets As Necessary)					
<b>25. Accounting And Appropriation Data</b> ACRN: AA 97 X4930AC6G 6D 26FB S11116 W52H09					<b>26. Total Award Amount (For Govt. Use Only)</b> \$78,795.00		
<input type="checkbox"/> <b>27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4. FAR 52.212-3 And 52.212-5 Are Attached.</b>					<input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.		
<input checked="" type="checkbox"/> <b>27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda</b>					<input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.		
<b>28. Contractor Is Required To Sign This Document And Return _____ Copies</b> <input type="checkbox"/> To Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein.					<b>29. Award Of Contract: Reference _____ Offer</b> <input type="checkbox"/> Dated _____. Your Offer On Solicitation (Block 5) Including Any Additions Or Changes Which Are Set Forth Herein Is Accepted As To Items:		
<b>30a. Signature Of Offeror/Contractor</b>					<b>31a. United States Of America (Signature Of Contracting Officer)</b>		
<b>30b. Name And Title Of Signer (Type Or Print)</b>		<b>30c. Date Signed</b>		<b>31b. Name Of Contracting Officer (Type Or Print)</b> JERRY L YOWELL /SIGNED/ YOWELLJ@RIA.ARMY.MIL (309)782-6736		<b>31c. Date Signed</b>	
<b>32a. Quantity In Column 21 Has Been</b>  <input type="checkbox"/> Received <input type="checkbox"/> Inspected <input type="checkbox"/> Accepted And Conforms To The Contract Except As Noted				<b>33. Ship Number</b>		<b>34. Voucher Number</b>	
				<input type="checkbox"/> Partial <input type="checkbox"/> Final			
<b>32b. Signature Of Authorized Government Representative</b>				<b>32c. Date</b>		<b>35. Amount Verified Correct For</b>	
<b>36. Payment</b> <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final				<b>37. Check Number</b>			
<b>38. S/R Account Number</b>				<b>39. S/R Voucher Number</b>		<b>40. Paid By</b>	
<b>41a. I Certify This Account Is Correct And Proper For Payment</b>				<b>42a. Received By (Print)</b>			
<b>41b. Signature And Title Of Certifying Officer</b>				<b>41c. Date</b>		<b>42b. Received At (Location)</b>	
				<b>42c. Date Recd (YYMMDD)</b>		<b>42d. Total Containers</b>	

<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b>  <b>PIIN/SIIN</b> DAAE20-01-D-0024/0002 <b>MOD/AMD</b>	<b>Page</b> 2 <b>of</b> 5
<b>Name of Offeror or Contractor:</b> CUSTOM TECHNOLOGY OF AMERICA INC		

SUPPLEMENTAL INFORMATION

1. CONTRACT DAAE20-01-D-0024 WAS AWARDED BASED ON CUMULATIVE ORDER PRICING. THEREFORE, A UNIT PRICE ADJUSTMENT IS CALCULATED BASED ON THE TOTAL CUMULATIVE ORDER QUANTITY. THIS ORDER FOR 10,300 HANDGUARDS EXCEEDS THE ORDER QUANTITY RANGE PREVIOUSLY ESTABLISHED. AS A RESULT, THE UNIT PRICE OF \$7.65 EACH WILL BE APPLIED TO THIS ORDER.

2. DELIVERY ORDER 0002 IS ISSUED AGAINST ORDERING PERIOD 1 FOR CLIN 0001, HANDGUARD ASSEMBLY, NSN: 1005-01-134-3629, PN: 9349059, AT A UNIT PRICE OF \$7.65 EACH FOR A TOTAL CLIN AMOUNT OF \$78,795.00.

3. THE DELIVERY SCHEDULE IS SET FORTH IN THE SUPPLIES/SERVICES PAGES.

4. THE GOVERNMENT IS UNDER NO FURTHER OBLIGATION TO PLACE ANY ADDITIONAL ORDERS.

5. THE TOTAL DOLLAR VALUE OF DELIVERY ORDER 0001 IS \$78,795.00.

6. THIS DELIVERY ORDER IS SUBJECT TO THE TERMS AND CONDITIONS CONTAINED IN THE BASIC CONTRACT, DAAE20-01-D-0024 AND SOLICITATION DAAE20-01-R-0041.

7. TOTAL CUMULATIVE ORDER QUANTITY: 27,800

\*\*\* END OF NARRATIVE A 001 \*\*\*

**Name of Offeror or Contractor:** CUSTOM TECHNOLOGY OF AMERICA INC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	SUPPLIES OR SERVICES AND PRICES/COSTS				
0001	<u>Supplies or Services and Prices/Costs</u>				
0001AA	<u>PRODUCTION QUANTITY WITHOUT FIRST ARTICLE</u>	10300	EA	\$ <u>7.65000</u>	\$ <u>78,795.00</u>
	NSN: 1005-01-134-3629 NOUN: GUARD,HAND,GUN FSCM: 19200 PART NR: 9349059 SECURITY CLASS: Unclassified PRON: M111S198M1      PRON AMD: 01      ACRN: AA AMS CD: 070011HFAM4  <u>Description/Specs./Work Statement</u> TOP DRAWING NR: 9349059 REVISION: C DATE: 15-FEB-1989  <u>Packaging and Marking</u> PACKAGING/PACKING/SPECIFICATIONS: MARKING IAW MIL-STD-129, REV N, 15 MAY 97 UNIT PACK: EA            INTERMEDIATE PACK: 001 LEVEL PRESERVATION: Commercial LEVEL PACKING: Commercial  <u>Inspection and Acceptance</u> INSPECTION: Origin      ACCEPTANCE: Origin  <u>Deliveries or Performance</u> DOC                                  SUPPL <u>REL CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG CD</u> <u>MARK FOR</u> <u>TP CD</u> 001 W52H091052A181 W62G2T    J                                  1 <u>DEL REL CD</u> <u>QUANTITY</u> <u>DEL DATE</u> 001                        1,000                        30-AUG-2001  FOB POINT: Origin  SHIP TO: <u>PARCEL POST ADDRESS</u> (W62G2T)    XU DEF DIST DEPOT SAN JOAQUIN TRANSPORTATION OFFICER PO BOX 960001 STOCKTON CA 95296-0130  <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-01-D-0024/0002  DOC                                  SUPPL <u>REL CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG CD</u> <u>MARK FOR</u> <u>TP CD</u> 002 W52H091052A182 W25G1U    J                                  1 <u>DEL REL CD</u> <u>QUANTITY</u> <u>DEL DATE</u> 001                        1,500                        30-AUG-2001  002                        5,000                        28-SEP-2001  003                        2,800                        31-OCT-2001  FOB POINT: Origin				

Name of Offeror or Contractor: CUSTOM TECHNOLOGY OF AMERICA INC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0002	SHIP TO: <u>PARCEL POST ADDRESS</u> (W25G1U) XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLAND PA 17070-5001  <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-01-D-0024/0002				
	<u>Supplies or Services and Prices/Costs</u>				
	<u>DATA ITEM</u>	1	LO	\$ <u>** NSP **</u>	\$ <u>** NSP **</u>
	NOUN: DD 1423 REQUIREMENTS SECURITY CLASS: Unclassified Contractor will prepare and deliver the technical data in accordance with the requirements, quantities and schedules set forth in the Contract Data Requirements Lists (DD Form 1423), Exhibit A.  A DD 250 IS NOT REQUIRED.  (End of narrative B001)				
	<u>Inspection and Acceptance</u> INSPECTION: Destination ACCEPTANCE: Destination				

Name of Offeror or Contractor: CUSTOM TECHNOLOGY OF AMERICA INC

CONTRACT ADMINISTRATION DATA

										JOB			
LINE	PRON/	OBLG								ORDER	ACCOUNTING		OBLIGATED
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>						<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>	
0001AA	M111S198M1	AA	2	97	X4930AC6G	6D		26FB	S11116		W52H09	\$	78,795.00
070011HFAM4													
											TOTAL	\$	78,795.00
SERVICE										ACCOUNTING		OBLIGATED	
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>							<u>STATION</u>	<u>AMOUNT</u>		
Army	AA		97	X4930AC6G	6D		26FB	S11116		W52H09	\$	78,795.00	
											TOTAL	\$	78,795.00